PART I - FACE SHEET

APPLICATION FOR FEDERAL ASSISTANCE

Modified Standard Form 424 (Rev.02/07 to confirm to the Corporation's eGrants System)

1. TYPE OF SUBMISSION:
Application [X] Non-Construction

2a. DATE SUBMITTED TO CORPORATION FOR NATIONAL AND COMMUNITY SERVICE (CNCS):	3. DATE RECEIVED BY STATE: 05-JUN-15	STATE APPLICATION IDENTIFIER: N/A
2b. APPLICATION ID: 15AC172440	4. DATE RECEIVED BY FEDERAL AGENCY:	FEDERAL IDENTIFIER: 12AFHOH0010019

5. APPLICATION INFORMATION

LEGAL NAME: Santa Maria Community Services

DUNS NUMBER: 072885585

ADDRESS (give street address, city, state, zip code and county):
617 Steiner St
Cincinnati OH 45204 - 1327
County: Hamilton

NAME AND CONTACT INFORMATION FOR PROJECT DIRECTOR OR OTHER PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION (give area codes):
NAME:
TELEPHONE NUMBER:
FAX NUMBER:
INTERNET E-MAIL ADDRESS:

6. EMPLOYER IDENTIFICATION NUMBER (EIN):
310537141

7. TYPE OF APPLICANT:
7a. Non-Profit
7b.

8. TYPE OF APPLICATION (Check appropriate box).
[ ] NEW [ ] NEW/PREVIOUS GRANTEE
[X] CONTINUATION [ ] AMENDMENT
If Amendment, enter appropriate letter(s) in box(es): [ ] [ ]
A. AUGMENTATION B. BUDGET REVISION
C. NO COST EXTENSION D. OTHER *(specify below):*

9. NAME OF FEDERAL AGENCY:
Corporation for National and Community Service

10a. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: 94.006
10b. TITLE: AmeriCorps State

11.a. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:
Project Advance
11.b. CNCS PROGRAM INITIATIVE (IF ANY):

12. AREAS AFFECTED BY PROJECT (List Cities, Counties, States, etc):
Greater Cincinnati, OH Hamilton County, OH
(OH, urban core neighborhoods of Price Hill, Lower and West Price Hill, Avondale,

13. PROPOSED PROJECT: START DATE: 09/01/15 END DATE: 08/31/16

14. CONGRESSIONAL DISTRICT OF: a.Applicant [OH 01] b.Program [OH 01]

15. ESTIMATED FUNDING: Year #: [2]

a. FEDERAL	$ 198,661.00
b. APPLICANT	$ 138,562.00
c. STATE	$ 0.00
d. LOCAL	$ 0.00
e. OTHER	$ 0.00
f. PROGRAM INCOME	$ 0.00
g. TOTAL	$ 337,223.00

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
[ ] YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:
DATE:
[X] NO. PROGRAM IS NOT COVERED BY E.O. 12372

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
[ ] YES if "Yes," attach an explanation. [X] NO

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. TYPED NAME OF AUTHORIZED REPRESENTATIVE: Bonnie Hood	b. TITLE:	c. TELEPHONE NUMBER: (513) 557-7264 402
d. SIGNATURE OF AUTHORIZED REPRESENTATIVE:		e. DATE SIGNED: 06/05/15

Narratives

Executive Summary

Executive Summary

The Santa Maria Community Services Project Advance program will engage 15 AmeriCorps members to provide Adult Education Tutoring and Job Placement Services (five members combined), and Community Health Care Accessibility and Health Navigation (10 members), at the following locations: GED Education and Job Placement Services: Santa Maria Community Services (SMCS)-Workforce Development Program (internal partner), Lower Price Hill Community Schools (LPHCS)(external partner), and LPHCS-Adult Basic Literacy Education(ABLE) Program at separate location. All partner sites are located in our low-income targeted neighborhoods in Cincinnati, Greater Price Hill, Ohio. Health Care Accessibility and Education: Cincinnati Public Schools (CPS) School Based Health Centers including Oyler School, Roberts Academy, Roll Hill Academy, Midway School, Ethel Tate Academy, The Academy of World Languages, Aiken High School, SMCS-Wellness Center, Health Care Access Now (external partner), Healthy Mom's and Babes (external partner), SMCS-Wellness Center (member located at Price Hill Health Center). All partner sites are located in our targeted neighborhoods.

At the end of the twelve month period, 300 individuals will have received services that remove barriers towards attaining a GED, 150 individuals will receive job readiness services to remove barriers to employment, 30 individuals will be employed, 4,770 clients will receive health services information, 4,068 clients will receive direct health treatment for preventative care, and 250 clients will have received one or more successful health care referrals, removing barriers to accessing community health resources. The AmeriCorps members will leverage 150 volunteers that will be engaged in assisting members with assigned duties as well as assisting with special health and education events throughout the year. This program will focus on the CNCS focus areas of GED Education-Job Placement Services, and Healthy Futures. The CNCS investment of $198,661 is matched with $138,562 from private funding.

Rationale and Approach/Program Design

1. A: RATIONALE AND APPROACH/PROGRAM DESIGN

Maria Community Services (SMCS) provides Cincinnati Greater Price Hill neighborhoods with educational tools and resources to build strong families, promote healthy residents, and foster neighborhood revitalization

The community needs that this AmeriCorps Project Advance program will address are: The high

dropout rate and high unemployment rate (documented in US Census) and the high percentage of uninsured in the Cincinnati Greater Price Hill neighborhoods. These needs coincide with the AmeriCorps focus areas of: GED Preparation, Job Placement Services, and Healthy Futures.

1. Severe Education Deficit / Lack of pre and post Job Placement Services

Rationale: There is a severe education deficit among residents in Cincinnati's low-income, inner city neighborhoods. Low educational attainment is a barrier to employment, limits parents' ability to support the education of their children, and leads to related issues of poor health and housing, lack of financial literacy and civic participation.

All Project Advance targeted neighborhoods fall into the lower economic quartiles and bear the burden of higher than average dropout rates and illiteracy rates (Social Area Report, The Social Areas of Cincinnati, An Analysis of Social Needs, 4th Edition, School of Planning, University of Cincinnati and UC Institute for Community Partnerships (UCICP)). By: Michael Maloney and Christopher Auffrey. This data reveals the pervasive, continuing link between poverty, unemployment, and illiteracy at the neighborhood level.

GED Approach: According to The United Way of Greater Cincinnati regional Assessment, Education 2012; Relationships (especially through mentoring) are the key to learning. Mentoring, which is estimated to be currently provided at less than 15% of total need, must be increased. Learning is delayed by generational and situational poverty, mental health challenges, and lifestyle issues such as transportation, family structure, and violence. Project Advance will partner with three sites currently offering older youth and adult literacy programs in our low-income targeted area. We will place four AmeriCorps members in these separate locations to increase capacity and enhance the overall effectiveness of their programs. The organizations are: Lower Price Hill Community Schools (LPHCS) and LPHCS¿s Adult Basic Literacy Education(ABLE) (at a separate location), and Santa Maria Community Services (SMCS)-Workforce Development Program (WFDP). These sites provide one on one mentoring, assessments, tutoring and instruction in basic literacy, adult education and GED classes, and homework assistance each week day. Two sites offer evening sessions to accommodate community students who are employed during the day. By partnering with these current GED programs and placing three AmeriCorps volunteers with them, we plan to enhance the quality and increase the effectiveness of these programs through member training in literacy, and through the individual qualities and skills our volunteers will bring to the programs.

Job Placement Services Approach: Project Advance will partner with SMCS-WFDP who works one on one with individuals seeking job readiness services, pre-employment services, job placement services,

and job retention/post-employment services with funding from a federal WIA grant and a federal LISC grant. Additionally, SMCS-WFDP hosts monthly employment workshops presented by SMCS full-time employment services staff. The workshops help participants build skills needed for gaining and maintaining employment by providing job readiness training and workplace simulations. Based on previous years of internal SMCS-WFDP data, most individuals entering this program tend to be youth age 16-21 and fall into a pre-employment category and require pre-employment services along with job placement services when they become ready. By partnering with this current comprehensive Job Placement program and placing our AmeriCorps volunteers with them, we plan to enhance the quality and increase the effectiveness of this program through comprehensive member training and the individual attributes and skills our volunteers will bring to the work. One AmeriCorps member in this program will focus their primary attention in the job placement services area.

2. Lack of Health Care Access

Rationale: There is a lack of primary health care access available to families and students in our targeted area. According to the 2009 The Center for Closing the Health Gap Assessment of the Cincinnati: Greater Price Hill Area: 42.4% adults reported they were uninsured. Data from the 2013 Greater Cincinnati Community Health Status Survey (of adults) reported that 73% of adults for all of Cincinnati reported being insured. This clearly highlights the need for increased health care access in our Greater Price Hill low-income area; with a 30.6% lower than average adult insured rate. The Child Wellbeing Survey conducted by the James M. Anderson Center for Health Systems Excellence revealed that 93% of children in the greater Cincinnati region possess health insurance. This contrasts dramatically with the 20% of children who possess health insurance in the Cincinnati Price Hill neighborhoods, reported in the same survey.

Fifty percent of respondents reported they usually go to the hospital, ER or urgent care for their healthcare needs, as opposed to a doctor's office or neighborhood clinic. This finding is also supported by Good Samaritan Hospital, which found Greater Price Hill zip codes had a 16% higher ER utilization rate than the rest of Hamilton County in 2007. Additionally, Crossroad Health Center's 2009 West Side Cincinnati Health Care Access Needs Assessment found ER visits in 2007 from Greater Price Hill zip codes were ranked in the top ten Ohio zip codes for ER visits. Barriers to accessing health services for all Cincinnati Greater Price Hill residents include transportation, language, lack of child care, literacy, cultural perceptions of health and well-being, and lack of understanding of access to the health care systems available to them. Seventy-five percent of Cincinnati Public School (CPS) students fall below the federal poverty line. Often a school nurse is

their only access to health services. According to a study published in the Journal of Public Health: Advancing Educational Success and Public Health, 2012. "The School Based Health Center (SBHC) is a successful model for providing quality health care services for children and adolescents that eliminates most barriers students face when they are trying to access health care. SBHCs are comprehensive health centers, which provide medical, dental and mental health screening and treatment to students in their schools. They are designed to overcome barriers to health care access. Approach: Project Advance will partner with The Cincinnati Health Department in the SBHCs and in the Cincinnati Price Hill Clinic, as well as with the non-profit organizations working for better health care access listed above. By placing AmeriCorps members in these organizations to act as Health Care Navigators, we hope to improve the overall effectiveness and increase the number of individuals receiving services at each of their programs. The school-based health centers in our targeted area are currently located at: Cincinnati Public School (CPS): Oyler School, Roberts Academy, Roll Hill Academy, Midway School, Ethel Tate Academy, The Academy of World Languages, and Aiken High School. Project Advance will place five members in these SBHCs to provide increased capacity, increased health care access for students and their families, and to experience a meaningful volunteer experience for these members.

The remaining partner organizations currently providing assistance with accessing health care services are: SMCS- Wellness Center (internal partner), Health Care Access Now (external partner), and Healthy Moms and Babes (external partner). All partner sites are located in our targeted neighborhoods in Cincinnati, Ohio. The five AmeriCorps members at these locations will contribute to the capacity of the organizations by increasing the number of one on-one-assistance to individuals seeking access health care services. Members will be contributing their skills acquired from our comprehensive trainings, and will be receiving a meaningful volunteer experience.

1 B. AMERICORPS MEMBER ROLES AND RESPONSIBILITIES Education Deficits - Job Placement Services

All Project Advance members volunteering for GED tutoring will serve at partner sites. Four AmeriCorps members will provide tutoring and instruction in basic literacy, skill level assessment, adult education and GED classes, and homework assistance. At an initial meeting with a new student the AmeriCorps member will present a brief orientation about the program. Once the new student is enrolled in the program, the AmeriCorps member will administer an assessment (Test for Adult Basic Education (TABE), score it, and talk with the student about his or her goals. This first test result serves as the basis for developing an education plan. AmeriCorps members use lesson plans drawn from

adult basic education materials as well as those geared to preparation for the PGED and for the official GED exam. Post tests will be administered periodically to track individuals' progress. Project Advance members are encouraged to draw on their own talents to augment the curriculum. Project Advance plans to facilitate regular meetings with the AmeriCorps members working with GED students to share best practices and best curriculum augmentations with each other's partner organizations.

Concurrently, clients may also be seeking job placement services at the time of enrollment. AmeriCorps members will enroll the individual in the program making note of their need for job placement services. One member volunteering for Job Placement Services will serve at a Project partner site currently offering a robust job placement services program. At an initial meeting with a new client the AmeriCorps member will present a brief orientation about the job placement services program offered. Once the new client is enrolled in the program, the AmeriCorps member will work one on one with the individual to assess their needs and design an individualized approach to providing job placement services designed to improve their job readiness and overcome barriers to employment. This will include but is not limited to obtaining a past work history, refining a resume, and identifying and offering solutions to barriers to employment, such as child care needs or lack of transportation. The AmeriCorps member will also enroll the individual and then assist with SMCS-LCW¿s bi-monthly Employment Workshops presented by SMCS full-time employment services staff. These workshops help participants build skills needed for gaining and maintaining employment by providing job readiness training and workplace simulations.

Health Care Access - Health Care Navigator

All Project Advance members volunteering as Health Navigators will be placed partner sites. Five members will serve as health navigators in SBHCs (Cincinnati Health Department Partner) assisting with health care access for all students in schools served. Their primary role is to serve as a liaison between the schools, the SBHCs and the families. These members facilitate and document health services for students receiving the services at the SBHCs. These services include but are not limited to health exams, determination of existing conditions, eye exams, dental exams, individual visits to the school health workers when needed, and medical insurance determinations. In addition to the SBHC locations, five Project Advance members will serve at partner site locations assisting with the partner organization¿s services to increase health care access to their clients. The members will enroll individuals in the program and give an orientation of the health access services offered at that site. As a health navigator, the AmeriCorps member will assist individuals and their families with the appropriate steps to overcome barriers to health care access as determined by the site partner's services

offered and their policies. All members volunteering as Health Care Navigators will assist with the organization and implementation of health education workshops and programs targeted to our neighborhoods. They will organize and facilitate wellness activity projects that promote community health and well-being. They will participate in various city-wide health and wellness focused events such as community Health Fairs. All Project Advance work will focus on providing services to people living in Cincinnati's, Greater Price Hill neighborhoods.

Our plan is for all member positions to be full-time. However, we will offer the availability of part time slots to allow some flexibility in meeting member as well as partner and community needs. Each year, prior to recruitment and placement the configuration of slots will be examined with Project Advance partners. All AmeriCorps members will wear AmeriCorps gear when possible at their partner site locations and will always wear AmeriCorps gear when attending any public function representing the AmeriCorps program. All printed materials distributed by members will contain the AmeriCorps logo.

1c. EVIDENCE-BASED

According to a recent United Way of Greater Cincinnati Income Assessment, 2012 (p 10), Education is the key to income self-sufficiency for the next generation. In order to be competitive and attract and retain employers who offer high-wage jobs, our regional community needs a well-educated workforce. An uneducated or under-educated population leads to a low-skilled workforce unable to meet the technological demands of new and growing industries. (Landrieu, M. L. and Murray, P. (August 10, 2011). How to Close the Skills Gap. The Wall Street Journal)

From the United Way of Greater Cincinnati Health Assessment, 2012, (p 3), Understanding health in general is important, but understanding where our region underperforms compared with the nation is critical to improving health outcomes. One of the major health issues that stand out as a particular problem in our region is: Infant Mortality: Infant Mortality is viewed by many as a good overall summary measure of health status for a community. Our region¿s infant mortality rate is considerably higher than the U.S. rate and is driven by persistently high infant mortality rates in Hamilton County (The United Way Community Research Collaborative 2009). Infant deaths in Ohio tend to be clustered in urban areas and are consistent with the fact that infant mortality rates are related to higher rates of poverty and increased rates of non-insurance (Ohio Infant Mortality Taskforce, 2009).

1d. MEMBER EXPERIENCE

Our robust four day initial orientation is the first step for a new member to have a quality AmeriCorps

volunteer experience. In addition, Project Advance members that will return from the Urban Appalachian Council's AmeriCorps program for a second or third year become part of an experienced cohort working with staff to ensure that incoming members have a clear understanding of what to expect and also to provide examples of potential experiences that are available to the new members during the upcoming year. Project Advance will work with other Cincinnati AmeriCorps programs on the all-city Member Gathering in the spring and also on planning and implementing the Ohio AmeriCorps week activities. Working with staff and volunteers, members will develop volunteer projects to foster leadership development and voluntarism. In this upcoming grant period, member development will include sessions on professional development, recruitment and support of volunteers, civic responsibility, service ethics, and life after AmeriCorps. We also believe that our participation in the Justice Talking trainings are an important part of allowing members to reflect on their service and discuss the impact they are having with other members.

1e. OVERALL PICTURE Project Advance addresses the issues of educational deficits, high unemployment, and lack of health care access in the Cincinnati Greater Price Hill community members by placing AmeriCorps volunteers at adult education-job placement sites, school-based health centers, and health care access partner sites to provide hands-on service to improve literacy, build job skills, and provide health education and increased health care access to more students, families and individuals. AmeriCorps members are well-suited for these activities because of their commitment to service, the comprehensive training they will receive through our internal training sessions as well as the hands on training at the partner sites, and their personal missions to include volunteering in their lives. Because of their intervention, older youth and adults who left school early will be able to put their lives and their families back on a track to success through advanced educational attainment and increased workplace skills. More students will be able to stay at school and have more successful academic outcomes because of the capacity created by members serving in school-based health centers assisting with student and family navigation to obtain needed health services. More individuals and families will have access to health care services due to the increased capacity made available by AmeriCorps volunteers serving in partner site locations currently offering health care access services.

1f. SELECTION, TRAINING, AND SUPERVISION (Selection):

A diverse mix of members will be recruited nationally through online advertising, locally through participation in college job fairs at several universities, networking with local high schools, advertising at local health fairs, networking with local agencies providing similar services to reach local residents,

word of mouth, and advertising at local events that allow current members to share information about the program and their service experience. We will also review applications submitted through the AmeriCorps website. Because our sites are located in our low-income neighborhoods, we will concentrate some local recruiting from that same population.

Member Training: Project Advance's three and one half day orientation includes: Team building activities, Blood Bourne Pathogens, Manual review, Conflict Resolution, Diversity, Community Sensitivity, Health Care Worker Training, HIV/AIDS, Compliance, On Corps training, and a tour of all partner sites. Supervisor Training: Includes OnCorps tutorials, Compliance and expectations.

For Project Advance members serving in the Education Deficit- Job Placement Focus Area our training plan includes formal training by the Greater Cincinnati Literacy Network (or an equivalent organization), coaching by an Educational Specialist, coaching by a Job Placement Specialist, and ongoing onsite training and supervision averaging 2 hours per week for each AmeriCorps member. Members will also participate in Professional Development, Cultural Sensitivity, and Civic Engagement trainings.

For Project Advance members serving in the Healthy Futures (Health Care Access) focus area, training includes technical training units on Health Disparities, Patient Relations, Professional Development, Cultural Sensitivity, Civic Engagement, Health Outreach, Health Education, Disaster Preparedness, Case Management, and Primary Care Environment.

After the initial orientation week, all members spend the next full week in training with their supervisors at their host sites.

1g. OUTCOME: PERFORMANCE MEASURES

As a result of our GED-Job Placement members¿ activities our partner agencies will see an increase in the number of individuals enrolled in their programs, an increase in the number of educational level advances, an increase in the number of practice GED(PGED) exams administered to their clients, and an increase in the number of passed Ohio GED exams. See: Performance Measures Outcomes.

Additionally, the agency working with job placement clients will see an increase in the number of pre-employment services provided to clients as well as an increase in the number of jobs attained by clients. See: Performance Measures Outcomes.

As a result of our Health Navigator members activities our SBHC partner sites will see an increase in students and families receiving health care services and an increase in referrals and appointments to additional services when required. As a result of Health Navigator members placed in our partner sites offering assistance to health care access the partner will see an increase in the numbers of individuals

and families receiving health care services. See: Performance Measures Outcomes.

We measure our impact by carefully collecting data for program enrollment, individual contacts, initial academic functioning through testing, post testing at a later date to measure grade level advances, PGED test scores, and success rates on passing the Ohio GED. We will also collect data to measure enrollment in a job placement services program, number of job placements, and job retention over set periods of time.

Our SBHC members will document the number of students receiving health education, and the number of students receiving health services. Our AmeriCorps members placed in our partner sites offering assistance with health care access will document the number of individuals being served and the type of services provided.

1h. VOLUNTEER GENERATION

Volunteer members will be linked to the United Way Voluntary Action Center and Volunteer Match. We will participate with local college Learn and Serve projects when available. Volunteers are recruited from a variety of sources. SMCS often receives offers to volunteer by groups from local churches, businesses and schools. Past clients will be recruited to volunteer. Parents of school children participating in the SBHCs will be recruited to volunteer. Volunteer engagement is an essential element of our program.

Organizational Capability

ORGANIZATION CAPACITY:

a. Background and Staffing

Santa Maria Community Services (SMCS) Mission and Vision:

SMCS empowers Greater Cincinnati Price Hill families as they achieve sustainable health, employment, housing and family life. SMCS is a catalyst to improve the well-being of Cincinnati Greater Price Hill families. SMCS plays a leadership role in addressing educational, human services, and community leadership development needs in the Cincinnati Greater Price Hill areas. Santa Maria currently provides services to more than 4,000 individuals and families annually, operates from five office locations in Cincinnati Greater Price Hill and Sedamsville/Riverside area, employs over 50 staff, and engages more than 500 volunteers who give more than 20,000 hours of their time annually. SMCS Board of Directors is comprised of a diverse group of individuals from corporate, non-profits, universities, hospitals, public schools, law firms, public courts, religious affiliations, and local residents.

Sources of funding for SMCS include federal funding (WIA and LISC), United Way of Greater

Cincinnati, Greater Cincinnati Foundation, corporate sponsors such as Proctor and Gamble and Chemed, USBank, and private foundations such as Sisters of Charity Ministries, and the Harrison and Pfau foundations. SMCS has been in the business of helping people for 117 years, with a proven track record of providing high quality sustainable programs. As a long time recipient of federal, state, local, corporate, and private funding, we have a proven record of being in compliance with all programmatic and financial regulations related to each funder. External audits of all funding are performed annually and are reviewed and approved by the Board of Directors. This AmeriCorps program will receive the same compliance and accountably attention implemented on all of our funding sources. We have an accounting staff currently employed at SMCS and we plan to employ an additional part-time book keeper under the supervision of our accounting staff, to work directly with the AmeriCorps funding to ensure fiscal compliance. SMCS AmeriCorps will enlist a 60% fte Director who will oversee the program and work directly with the partner sites, member supervisors, and all program compliance, legal and programmatic requirements. The Director will be responsible to maintain relationships with the partner sites to ensure that each site remains in compliance with all AmeriCorps programmatic and fiscal regulations. Monthly program review by Program Director and Coordinator and site supervisors at each partner site is planned as a way to detect and prevent programmatic and or fiscal compliance issues. This regular communication is intended to keep all parties on track with the grant requirements and will quickly highlight any potential issues that may arise. We feel it is imperative to the success of this program, for both members and the community agencies, to identify any potential problems as soon as possible and to then come to a resolution rapidly. This timely feedback will also serve as a source for suggestions and implementation of program improvements when identified. This agency has a long track record of working with a diverse group of community organizations and successfully implementing large federal programs. SMCS AmeriCorps program will enlist a full-time Program Coordinator who will work primarily with the members and their site supervisors. This coordinator will interact at least weekly with members to ensure their volunteer experiences are progressing successfully and the needs of the organizations where they are servicing are being met. The Program Coordinator will work directly with each member to ensure high quality data collection. Members will be trained on the proper data collection techniques during their initial week-long orientation. Data collected will be reviewed weekly at first, then bi-weekly when appropriate by the Program Coordinator and the members. This timely review of data will be informative for identifying potential areas of continuous improvement of the program. As the year progresses, it is likely that the data will reveal stronger and weaker areas of service to clients.

A plan would then be implemented to make appropriate adjustments to the weaker areas. The program coordinator will work with site supervisors and members to address any data collection issues that may arise. The Program Coordinator will facilitate twice monthly member training/enrichment and will assist the members with seeking additional volunteer opportunities. SMCS employs a volunteer recruitment and retention specialist. This AmeriCorps program will enlist her assistance to aid the members with each of their volunteer recruitment requirements.

The goals of this AmeriCorps program align extremely well with the services already being offered at SMCS. Enlisting external partner sites who offer these services through varying approaches can only strengthen and improve the impact on the overall community. The AmeriCorps members in this program will be able to choose from a variety of sites and several types of services offered to complete their volunteer service.

Previously at SMCS

GED/Job Placement:

Last year SMCS-WFD graduated 92 Ohio GED students and assisted 485 students with GED tutoring, assisted 116 individuals with job placement services, and placed 77 individuals in jobs.

Health Care Access:

Last year SMCS assisted 930 individuals overcome one or more barriers to health care access.

b. Sustainability

SMCS has a one hundred and seventeen year history of funding successful programs targeted towards the Cincinnati Greater Price Hill neighborhoods. We partner financially with United Way of Greater Cincinnati, Interact for Health, national and local corporations, and national and local foundations who value and fund the mission and services offered by SMCS. We plan to strategize with the Cincinnati Health Department and local colleges and universities to develop pathways for members to complete the requirements necessary to earn a Community Health Worker License. Members will continue to build their health worker skills and will be able to utilize their education awards. This in turn will support the retention of the capacity of growth at the SBHCs for the health department by eventually employing our exiting AmeriCorps members. We will also explore similar opportunities with local colleges and universities for our GED-Job Placement members to increase their technical skills and enhance their volunteer experience. It is our hope that a connection with a college or university for our GED-Job Placement members will increase the likelihood of them perusing additional formal education.

Along with the SMCS Volunteer Coordinator¿s efforts to assist with volunteer recruitment and

participation for the AmeriCorps members, we plan to engage our Board of Directors to broaden the base of volunteers working at the GED-Job Placement sites.

c. Compliance and Accountability

Project Advance members will serve in sites located in the Cincinnati Greater Price Hill neighborhoods. This closeness allows for frequent in-person communication among the AmeriCorps staff, the site supervisors, and the members. We will create effective ways to ensure communication between our staff, the members, and the sites so that successes and ideas can be shared and if problems arise, they can be resolved quickly. Our primary system for communication will include quarterly site directors' meetings, bi-monthly member meetings for training or team building sessions; and a set of simple, easy to follow forms and policies on submitting student contact and progress data to be entered into the database. We will maintain photocopies of all student test results, for example, so we can verify academic progress. During initial interviews, during orientation, and regularly through the program year, members are reminded at meetings about the Corporation's role, expectations and prohibited activities. Also, each member is given an orientation packet and member handbook. We will use the internet to share monthly calendars and quarterly newsletters for members and site directors. These will include training opportunities, both required and optional, and feature stories about member accomplishments. We will also use it to share national service news with the team and with site staff. Site directors sign letters of agreement annually which clearly spell out their obligations. The partner sites returning (former UAC) are well versed in AmeriCorps documentation requirements and compliance expectations and have a great deal of experience supervising members. We will be working this year to bring that same level of understanding to new site partners. We plan to have quarterly site supervisor meetings to share information, best practices, and successful resolutions to problems that arose.

d. Continuous Improvement

Project Advance will obtain monthly program feedback from Partner site supervisors through in-person meetings and/or phone conversations. We will obtain program progress feedback bi-monthly from members at regularly scheduled training sessions. As the program progresses, the data collected will be examined to evaluate the volume and advancement of the clients being swerved. Adjustments to the program will be made as appropriate, dictated by the data.

e. Enrollment and Retention

Project Advance will strive for 100% member enrollment and 100% member retention.

A diverse mix of members will be recruited nationally through online advertising, locally through

participation in college job fairs at several universities, networking with local high schools, advertising at local health fairs, networking with local agencies providing similar services to reach local residents, word of mouth, and advertising at local events that allow current members to share information about the program and their service. We will also receive applications through the AmeriCorps website. Because our sites are located in the low-income neighborhoods we are targeting, we will concentrate some local recruiting from that same population. We believe the most relevant factor in member retention is providing each member with a high quality orientation, regular professional and technical trainings, and a satisfying volunteer experience at their partner sites. Weekly in-person communication between our members and our AmeriCorps staff will ensure that we are aware of the members¿ ongoing quality of their experiences. In-person intervention can occur as frequently as needed if problematic issues arise between members and their site supervisors. We also plan to devote a portion of time at each bi-monthly member training to encourage members to share experiences, both good and challenging. We believe this sharing among members will reinforce the closeness of the 2015 cohort. Our goal is to complete this program year with 15 highly effective and very satisfied members who feel as if they contributed to the success of the programs they served and to their community.

Cost Effectiveness and Budget Adequacy

Cost Effectiveness and Budget Adequacy

Our cost per member service year (MSY) is $13,244. We have a substantial cash contribution from local agencies totaling $229,000. This includes $147,000($9,800 from each partner site) and $82,000 from United Way of Greater Cincinnati. Additionally, In/Kind contributions of $41,250 will be contributed through weekly partner site supervisor training and individual mentoring of members. This In/Kind contribution will be tracked in OnCorps.

This proposal requests support for an administrative staff of 1.87 fte's to support a team of 15 members in ten different program locations. This lean administrative design is possible due to the fact that the site directors will provide the day-to-day supervision and on-site training of members as an in-kind donation to the project. This allows for one Program Coordinator (100% fte) to facilitate the oversight of our 15 members. The Program Coordinator works closely with the site supervisors and the members to ensure the compliance, effectiveness and success of the program. The Program Coordinator also works closely with each member to ensure they experience personal growth and they experience a meaningful volunteer service year.

The additional personnel requested in this proposal are for a Program Director (81% fte) to oversee the

program progress, cultivate partner relationships, maintain AmeriCorps compliance requirements, facilitate all contractual matters, approve budgets and programmatic data in OnCorps, and assist with member experiences and trainings. We are also enlisting the services of a SMCS Health Care Trainer (5% fte) to engage our members in the many training opportunities that SMCS is able to offer to our members. One example: SMCSs Community Health Worker Training. This will be offered entirely to our member cohort. This trainer will also seek out and facilitate appropriate health care trainings offered at other organizations for our members. She will work with the Program Coordinator to facilitate trainings for the GED-JOBS members as well.

It is our expectation that by utilizing the many talents of individuals already working at SMCSs our AmeriCorps program will be more robust and more successful.

All other costs included in the budget are appropriate for the execution of the program. All travel and training costs are detailed in the budget and necessary for the program. All Other Program Costs are detailed in the budget and are calculated using agency standard policy. All unallowable costs are In/Kind donations from SMCS.

The total cost of this program is $427,661. $198,661 is CNCS funding and $229,000 is Match funding.

Evaluation Summary or Plan

N/A

Amendment Justification

N/A

Clarification Summary

Rationale and Approach:

Confirm program start and end dates are 9.1.15 to 8.31.16. Start dates of Project Advance are 9.1.15 to 8.31.16.

Clarify the member start and end dates. Project Advance AmeriCorps members start date is 9.1.15. End date is 8.31.16.

Provide a rationale for change in MSY allocated across the objectives.

7 MSY will be allocated to GED/Workforce/Housing, up from 5 last year. We had more interest from

partners whose missions are GED, Workforce, Housing this year, and less interest from Healthy Futures partners for this year. Therefore, 8 MSY will be in Healthy Futures instead of 10.

Provide a rationale for change in host sites from the current year. Include how the organizations were selected.

Our goal is to insure 15 MSY. We knew we were losing one position from Cincinnati Works and two positions from Education Matters. We selected one additional host site to compensate. We selected Urban League because they have a very similar mission to our program with established programs in K-12 education and workforce development. They serve an urban core of clients. We plan to place one member in each one of their programs, for a total of two.

For each service site, clarify the objectives (Healthy Futures or GED/Employment) each site will be supporting and how many members will be serving at each.

Santa Maria Community Services - Healthy Futures - 2
Santa Maria Community Services - GED/Employment - 4
Cincinnati Health Department - Healthy Futures - 5
Healthy Moms and Babes - Healthy Futures - 1
The Urban League - GED/Employment - 2
Education Matters - GED - 1

Clarify when the organization will train new site supervisors. Include details of the training information.

Santa Maria Community Services will train new site supervisors on September 4, 2015. Site supervisors will be trained in AmeriCorps rules and regulations so that they know what their members can and cannot do. Site supervisors will be given a Site Supervisor Handbook. Each site supervisor is trained in OnCorps to monitor and approve their member(s)' timesheets. Site supervisors will receive information on member training and training schedules.

Confirm or clarify that the program will place four AmeriCorps to serve at Lower Price Hill Schools, the LPHC ABLE program and also within the SMCS WFDP to provide adult tutoring, GED preparation and basic literacy services. As well, one additional member will also serve at SMCS WFDP

providing pre-employment services. This is correct.

The application states that the program will place five members within CPS School Based Health Centers in seven schools. Clarify how many members will be serving multiple schools. To clarify, one member at Oyler Dental, one member at Oyler Vision (two locations at one school), one member at Aiken High School, one member at Academy of World languages, and one member at Ethel Tate Academy. Seven schools were listed in the application as ¿possible¿ locations.

The application states that the program will place five members with three health care services locations. Clarify which location(s) will host more than one member. To clarify: Healthy Moms and Babes will house two members. Health Care Access Now will house one member, The SMCS Wellness Center will house two members.

Clarify in which instances it would not be possible for AmeriCorps members to not wear AmeriCorps gear. Clarify if all members will be provided gear and instructed to wear it during their service hours. To clarify, members are instructed during orientation to wear gear or AmeriCorps identifier lapel pin during their service time. We provide an AmeriCorps Logo T-shirt and AmeriCorps Logo lapel pins.

Clarify the program's impact as it relates to infant mortality rates in the service area. How does the county¿s ¿high infant mortality¿ rate compare to other urban Ohio counties and clarify if changes in the communities¿ infant mortality rate will be tracked during the program. To clarify, the reference to Infant Mortality Rates in the Evidence Based Section, was used as a highlight to point to the high poverty rates in Price Hill. This program has no intention of measuring Infant Mortality Rates.

Clarify if all members will receive training on prohibited activities, national service/AmeriCorps, Life after AmeriCorps and other required topics. To clarify, during the first week of orientation all members are trained on prohibited activities per their member handbooks and their service contracts. Also during orientation members are educated on National Service, History of AmeriCorps, and Life after AmeriCorps and other required topics.

Clarify if, and when, supervisors will receive training on hosting a member. Also, clarify the organization¿s communication plan with host site organization and site supervisors. To clarify

supervisors receive orientation and training during the first week of member orientation (see schedule). The communication plan consists of quarterly site supervisor meetings, monthly site visits, and email communication.

Clarify the organization¿s member meeting plan beyond initial orientation. When and how often will the whole Corps come together during the program year? How often with members in each focus area gathers for training and support? To clarify, members will come together twice a month for trainings focused on service, leadership development, health related topics, education related topics, Justice Talking, and other relevant trainings. During these monthly meeting, members in similar focus areas will break into small groups for more focused discussions. We will also meet with members from other CNCS programs in the area.

Clarify how often the program coordinator and/or director will visit the host site locations. To clarify, the Program Coordinator will visit the host sites monthly or more often if needed. Director will visit host sites when needed.

Clarify if the members will receive the required mid and end-of-year evaluations. To clarify, members will receive their mid-term evaluation no later than April first, their end of year evaluations will be completed by August first.

Clarify the expectation for host site supervisors in providing on-going/routine member meetings and if they will be approving member timesheets. To clarify, during site supervisor orientation, supervisors will receive instructions regarding on-going/routine member meetings and site supervision, including timesheet approval.

Clarify the organization¿s commitment to AmeriCorps (as specified in the NOFO). To clarify: SMCS will adopt the same approach to advertising their current programs for the new AmeriCorps program. AmeriCorps logos will appear on all SNCS publications, advertisements, and letter head. Our new members will receive several days of training and orientation about AmeriCorps and what it means to serve as an AmeriCorps member. Our AmeriCorps members will always have an AmeriCorps identifier on their person when serving. They may wear AmeriCorps logo t-shirts provided to them, or their AmeriCorps logo lapel pins, also provided to them. During scheduled workshops throughout the

year, the members will be educated and coached about speaking to others regarding their AmeriCorps experience.

Clarify if the members¿ providing adult education will receive a tutoring credential. To clarify, members providing adult education tutoring services will receive a tutoring credential.

Organizational Capacity:
Clarify if the organization will be hiring a new Program Director and/or Program Coordinator or if these positions will be filled by current SMCS employees. To clarify, SMCS will be utilizing current staff.

Clarify the organizations success in similar programming. To clarify, SMCS has many years of successful adult education programing, health and wellness programming, and workforce development programming. We have many years partnering with our new host sites, and currently administer an AmeriCorps grant.

Continuation Changes

2015-2016
Continuation changes:
During this second year of operation we plan to place seven members serving in GED/Employment/Housing Supports at various agencies. We plan to place eight members serving in Healthy Futures at various agencies. During our first year we started with five GED/Employment/Housing Supports and ten Healthy Futures members.
Our partner organizations this year will include: Santa Maria Community Services, Education Matters, Cincinnati Health Department, Urban League of Greater Cincinnati, The Healing Center, Healthy Moms and Babes, Lawnlife, and Tech Reach.
The expansion to new sites does not affect the number of members serving, this remains at 15. These new sites provide similar services to meet grant requirements and the needs of the community (GED, Jobs, Health Navigation) also expanding the geographical influence of our program.
Budget changes:
Cost per MSY: $13,244. Decreased by $22.
Member retention: two of our original 15 members did not complete their entire year. One member obtained employment and one member was requested by the partner agency to not continue her

service. Our plan to retain 100% of our new members is to increase our efforts to successfully match partner agencies with the members' goals for a rewarding year. After completing the placement process in year one, we learned that more intensive interviewing should be done by us and by the partner agency.

Performance Measure:

Adjustment in Healthy Futures Performance Measure (Outcomes)to correctly identify students receiving health services in schools, and adult clients receiving health navigation and services at partner agencies. This performance measure was adjusted in 2014-2015 award year, per Mary Cannon.

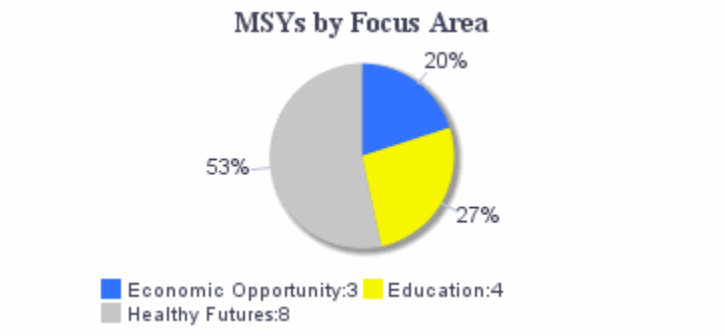
2016-2017

Continuation changes:

No known changes from year two.

Grant Characteristics

Performance Measures



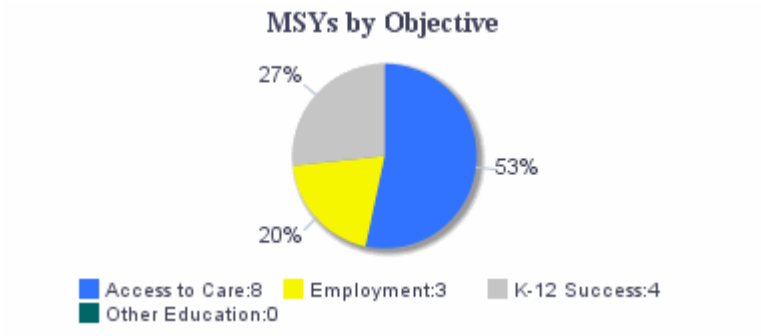


Table1: MSYs by Focus Areas

Focus Area	% MSYs
Economic Opportunity	20%
Education	27%
Healthy Futures	53%

Table2: MSYs by Objectives

Objectives	%MSYs
Access to Care	53%
Employment	20%
K-12 Success	27%
Other Education	0%

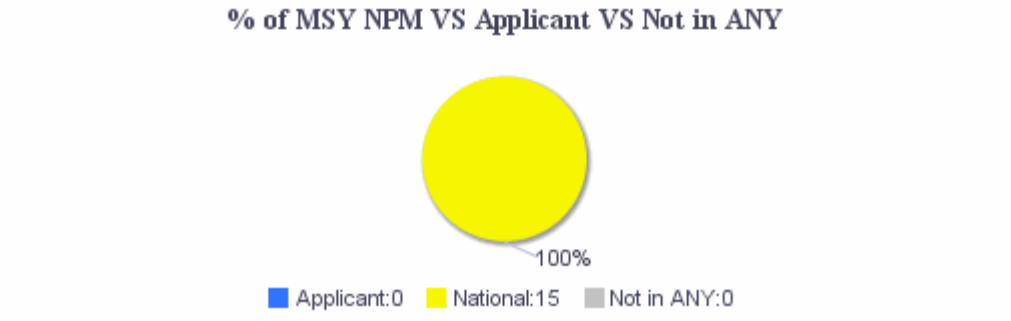


Table3: %MSYs by NPM vs.Applicant vs. Not in ANY

% MSYs	NPM	Applicant	Not in ANY
	100%	0%	0%

Table4: No of MSY and Members by Objective

Objectives	No of MSYs	No of Members
Access to Care	8.00	8
Employment	3.00	3
K-12 Success	4.00	4
Other Education	0.00	0
Total	15.00	15

Primary Focus Area:	Education
Primary Intervention:	Tutoring--Small Group
Secondary Focus Area:	
Secondary Intervention:	

Performance Measure: GED/At Risk Youth

Focus Area:	Education	Objective:	K-12 Success	No of MSY's:	4.00	No of Members:	4

Problem Statement:

There is a severe education deficit among residents in Cincinnati's low-income, inner city neighborhoods. Low educational attainment is a barrier to employment, limits parents' ability to support the education of their children, and leads to related issues of poor health and housing, lack of financial literacy and civic participation.

Selected Interventions:

Tutoring--One on One
Tutoring--Small Group

Describe Interventions:

GED: Initial skills assessment test (TABE) is administered within first week of enrollment.
Individualized instruction is provided for students to receive one on one tutoring and small group coaching five days per week and four evenings per week. Continuous TABE tests are administered to students to monitor their academic skill levels with the intention of adjusting individualized curriculum to fit the student. Also, students receive assistance with electronic GED registration. If student does not pass GED exam, curriculum is developed and delivered to student to address weak academic areas.
At-Risk Youth program: Students are enrolled in after school tutoring program at Cincinnati Public School participating 15 hours per week. Previous Ohio Graduation test score and school grades are provided to assist with individualized curriculum development. Quarterly grades are monitored to adjust individualized tutoring curriculum where indicated. Second OGT test results are reviewed to adjust curriculum.

ED2 Output:

(PRIORITY) ED2: Number of students completing a CNCS-supported education program

Target: 275 Students

Measured By: Attendance Log

Described Instrument: Students will be reported as completing a program after 10 hours logged on the sign in and out daily attendance sheets at all three program partner sites.

ED1 Output:

ED1: Number of students who start in a CNCS-supported education program.

Target: 300 Students

Measured By: Attendance Log

Described Instrument: Initial intake information of all students enrolled in three programs is entered in to each agency's database.

ED26 Outcome:

ED26: Number of students acquiring a GED.

Target: 25 Students

Measured By: GED Completion Record

Described Instrument: GED Test Results

ED9 Outcome:

ED9: Students graduating from high school on-time with a diploma.

Performance Measure: GED/At Risk Youth

Problem Statement:

Selected Interventions:

Tutoring--One on One

Tutoring--Small Group

Target: 25 Students

Measured By: Graduation Records

Described Instrument: High School diploma

Performance Measure: Job Placement Services

Focus Area:	Economic Opportunity	Objective:	Employment	No of MSY's:	3.00	No of Members:	3

Problem Statement:

Lack of assistance to overcome barriers to employment in low income target population. Barriers to employment limits parents' ability to support their families and support education for their children. Additionally high unemployment rates lead to related issues such as poor health, lack of suitable housing, lack of financial literacy, and lack of civic participation.

Selected Interventions:

Job Placement Services

Describe Interventions:

Job placement services - Daily one on one employment coaching; monthly job readiness workshops; weekly individualized job search assistance sessions; weekly coaching on job retention and advancement. Based on past experience from SMCS's Workforce development program 374 clients will participate. 125 clients was determined by past experiences with SMCS workforce development program. These 125 clients will gain at least a 10% increase in their work readiness skills as indicated by a pre and post test. We determined 140 clients will obtain employment, this number is based on past experiences with SMCS's workforce development program.

O3 Output:

O3: Number of econ disadv individuals receiving job placement services.

Target: 375 Economically Disadvantaged Individuals

Measured By: Activity Log

Described Instrument: Activity logs - Track individual's enrollment and participation in one on one job placement coaching services. Activity logs - track attendance and completion of Employment Workshops. Pre and post workforce knowledge skills testing.

OUTCM12187 Outcome:

Individuals will gain skills about job seeking and job retention.

Target: 125 individuals

Measured By: Other

Described Instrument: Pre and post test administered to participants to determine their knowledge of workforce skills before and after completion of workforce development workshop.

O10 Outcome:

O10: Number of econ disadv individuals placed in jobs.

Target: 140 Economically Disadvantaged Individuals

Measured By: Other

Described Instrument: Documentation of employment in form of letter or follow-up phone call from AmeriCorps members to place of employment.

Performance Measure: Community Health Navigators

Focus Area:	Healthy Futures	Objective:	Access to Care	No of MSY's:	3.00	No of Members:	3

Problem Statement:

There is a lack of primary health care access available to families and students in our low-income targeted area. Barriers to accessing health care services for target residents include transportation, language skills, lack of child care, low literacy rates, cultural perceptions of health and well being, and a lack of understanding of access to health care systems available to them.

Selected Interventions:

One-on-One Interaction

Describe Interventions:

275 adult clients receive one on one encounters with AmeriCorps members at partner sites to receive information on health insurance, access, and benefits.

H2 Output:

H2: Number of clients receiving information on health insurance, access and benefits

Target: 275 Clients

Measured By: Activity Log

Described Instrument: Members keep activity logs in databases recording client services provided at each visit

OUTCM13825 Outcome:

Clients participated in one or more health service or received assistance with benefits enrollment

Target: 250 individuals

Measured By: Other

Described Instrument: Activity logs: Members track individuals and services received in a database at each partner agency.

Performance Measure: School Based Health Access Services

Focus Area:	Healthy Futures	Objective:	Access to Care	No of MSY's:	5.00	No of Members:	5

Problem Statement:

Lack of primary health care access available to students and their families in our low-income targeted areas. Barriers to accessing health services include low literacy rates, cultural perceptions of health and well being, and a lack of understanding of health care systems available to them. Students in this target population do not receive recommended annual physicals, dental exams, vision exams, or other health services as needed.

Selected Interventions:

One-on-One Interaction

Describe Interventions:

Members assist medical personnel at School Based Health Centers in providing students with recommended annual health services, including physicals, vision exams, and dental exams. Members also assist medical personnel is providing other health services as needed.

H3 Output:

H3: Number of clients enrolled in health insurance and benefits programs.

Target: 4520 Clients

Measured By: Program Records

Described Instrument: School Based Health Center enrollment and services database reporting

OUTCM25855 Outcome:

of individual students receiving one or more health service

Target: 4068 individual student

Measured By: Other

Described Instrument: All health services data is recorded in the School Based Health Center database. Reports are generated monthly and include date, type of service, and number of services provided.

Program Information

General Information

*My organization has previously received an AmeriCorps State and National Grant. Organizations that have been a host site for AmeriCorps members but never had a direct grant relationship with either a State Commission or CNCS should answer "No."	Yes
*Opt in to the National Service Registry. Applicants wishing to make information from their application available to potential private sector funders can opt in during the application process by selecting "Yes."	Yes

2015 AmeriCorps Funding Priorities

*Check any priority area(s) that apply to the proposed program. In order to receive priority consideration, applicants must demonstrate that the priority area is a significant part of the program focus, high quality program design, and outcomes.	Economic Opportunity, Education, Successfully Entering the Workforce

Populations Served

*Check the appropriate box(es) to identify the populations the proposed program will serve. If you do not plan to serve any of the listed populations, select "None of the above."	Disadvantaged youth (K-12)

Grant Characteristics

*Check any grant characteristic(s) that apply to the proposed program.	Community-based organizations, Geographic Focus-Urban

Demographics

Local, State, and Federal Government Match	0
Private Match	138562
Total Match Dollars	138562
Other Revenue Funds	0
Number of episodic volunteers generated by AmeriCorps members	50
Number of ongoing volunteers generated by AmeriCorps members	0
AmeriCorps members will wear AmeriCorps logo every day.	1
AmeriCorps members will create and deliver elevator speeches	1
The AmeriCorps logo will be proudly displayed on the front page of the organization's website.	1
Percentage of MSY who are opportunity youth, if any	0
Number reported in O15 who are opportunity youth	0
Number reported in O17 who are opportunity youth	0

Required Documents

Document Name	Status
Evaluation	Not Applicable
Labor Union Concurrence	Not Applicable

Logic Model

Problem	Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes
The community problem that the program activities (interventions) are designed to address.	Resources that are necessary to deliver the program activities (interventions), including the number of locations/sites and number/type of AmeriCorps members.	The core activities that define the intervention or program model that members will implement or deliver, including duration, dosage and target population.	Direct products from program activities.	Changes in knowledge, skills, attitudes and opinions. These outcomes, if applicable to the program design, will almost always be measurable during the grant year.	Changes in behavior or action. Depending on program design, these outcomes may or may not be measurable during the grant year.	Changes in condition or status in life. Depending on program design, these outcomes may or may not be measurable during the grant year. Some programs, such as environmental or capacity-building programs, may measure changes in condition over a period as short as one year.
There is a lack of primary health care access available to families and students in our low income targeted areas. Barriers to accessing family health care services for clients include low literacy rates, cultural perceptions of health and well being, and a lack of understanding of access to health care systems available to them.	Three Health Navigators at two partner locations and five School Based Health Access Service members at five locations. Partner Agencies include: Cincinnati Public School Based Health Centers (SBHC),, Cincinnati Health Department, Santa Maria Wellness Program, Healthy Moms and Babes. Also, training consultants, United Way, Serve Ohio, AmeriCorps training, gear, materials, and	School Based Health Centers Members: Assist medical personnel in providing recommended annual health services to K-12 students in Cincinnati Public Schools. Health Navigators: Promote health insurance enrollment, assist clients with applications to obtain health resources, assist with scheduling follow up appointments of doctor visits, assist partner	SBHC: Information provided to 5,650 students about medically recommended annual health services available in Cincinnati Public Schools to enrolled K-12 students. H3 Agency Partners: 275 Clients participate in one on one encounters to receive information on heath insurance and health benefits available in the community and/ or access to a health service. H2	SBHC: 4,520 students are enrolled in a SBHC to be eligible to receive health services. Adults: 275 individuals gain knowledge about health services available at each partner site, and in the community. Clients gain knowledge through education about healthy lifestyle practices and health prevention programs.		Students: 4,068 students received one or more medically recommended health service at their SBHC. Adults: 250 clients participate in medically recommended health services, preventative screenings, health treatments, and/or insurance enrollment; removing the barriers of lack of health care access.

Problem	Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes
	manuals.	agencies with client health and developmental screenings. and assist medical teams to link families with available community resources.				
Problem: GED/At-Risk Students: Severe education deficit among residents in Cincinnati's low income, inner city neighborhoods. Low educational attainment is a barrier to employment, limits parents' ability to support the education of their children, and leads to related issues of poor health and housing, lack of financial literacy, and civic participation. Problem: Job Placement: Lack of assistance to overcome barriers to employment. Barriers to employment limit	7 AmeriCorps GED tutors/Job Placement Coaches. Partner Agencies: Education Matters(GED), Santa Maria Community Services(GED and Workforce), Urban League of Cincinnati(At-Risk Youth and Workforce). Also, training consultants, United Way, ServeOhio, AmeriCorps trainings, gear, materials.	GED: Students enroll in programs, skills are assessed with TABE tests. instructions are provided five days per week including tutoring, mentoring,and coaching. Periodic TABE tests are administered to monitor individual progress and to adjust curriculum. At -Risk Youth: Students enrolled in after-school program, initial Ohio Graduation Test scores are reviewed. Tutoring, mentoring, and coaching is provided 15 hours per week. Quarterly grade are used to	GED: 300 Students enroll in a GED or an At Risk Youth academic program and academic skills are assessed. ED1 Job Placement: 375 Economically disadvantaged clients receive one or more job placement services. ED3	GED: 175 students complete K-12 education program by attending a minimum of ten hours of GED instruction. 100 At Risk Youth students have attended a minimum of ten hours of after school academic tutoring. ED2 Job Placement: 125 individuals will gain skills about job searching and job retention through workshop attendance.		GED/At-Risk students: 50 students earn a passing score on the GED exam or earn their High School Diploma. ED26, ED9 Job Placement: 140 clients will be placed in jobs. O10

Logic Model

Problem	Inputs	Activities	Outputs	Short-Term Outcomes	Mid-Term Outcomes	Long-Term Outcomes
parents' ability to support their families.		monitor student academic progress to adjust curriculum. Job Placement: Job readiness coaching, assist instruction in Employment Workshops, pre and post workforce skills assessed, resume building and job searches for clients.				